

**U. S. Office of Personnel Management  
Washington Service Center**

**VACANCY ANNOUNCEMENT**

**Vacancy Announcement Number:** WA-CG-9-5418

**Opening Date:** 8/24/1999

**Closing Date:** Indefinitely

**Position:** Office Automation Clerk, GS-0326-4

**Number of Positions:** Several

**Full Performance Level:** GS-7

**PERMANENT AND TEMPORARY POSITIONS MAY BE FILLED FROM THIS VACANCY ANNOUNCEMENT.**

**Duty Location:** National Science Foundation  
Office of Information and Resource Management  
Division of Human Resource Management  
Arlington, VA

**Applications will be accepted from:** All Sources

**NOTE:** A standing register will be established from this announcement. A list of eligibles will be issued periodically upon request from the agency.

**MAJOR DUTIES:** The incumbent of this position will be responsible for receiving and screening incoming calls, applying initiative and judgement in the disposition of a wide variety of inquiries via telephone calls and visitors. Maintains control records of incoming correspondence, follows up as necessary to ensure that proper action is taken within prescribed time limits. Types routine correspondence and reports, reviews outgoing correspondence for signatures, grammatical accuracy and makes sure background information is attached. Uses office automation technology to perform a variety of difficult typing and word processing assignments which may include reports, documents, statistical material, letters and memoranda, charts, graphs, etc. Establishes and maintains subject matter files. Assembles and summarizes information from files and documents in the office and other sources for Supervisor's use. Receives requests for information and advises when the material can be furnished and prepares it personally or follows up to see that it has been prepared within specified time frames. Arranges for meetings or conferences which include coordinating mutually agreeable time frames, reserving rooms, notifying participants and preparing needed reports of proceedings.

**QUALIFICATION REQUIREMENTS:**

**Applicants must submit a clerical notice of results and meet at least one of the qualification requirements described under A, B, C, or D below:**

- A. One year of progressively responsible clerical, office, or other work that demonstrates your ability to acquire the particular knowledge and skills needed to perform the duties of the position,
- OR
- B. Completed at least 2 years of study (60 semester hours of 90 quarter hours) above the high school level from an accredited college or university;
- OR
- C. Completed at least 2 years of classroom hours (1440 hours) from a business or secretarial school or vocational school;
- OR
- D. Combination of education and experience: If you do not qualify based on education or experience alone, you can combine your education and experience by totaling qualifying experience as a percentage of the experience required for the grade level (one year/12 months at 40 hours per week); then determine your education as a percentage of the education required for the grade level (2 years above high school, 60 semester hours/90 quarters hours); then add the two percentages. The total percentage must equal at least 100% to qualify for the GS-4 grade level.

**NOTE: You must be a qualified typist (40 words per minute).**

#### **OTHER INFORMATION:**

You must be a United States citizen to apply.

To be eligible for Federal employment, male applicants born after December 31, 1959, must certify at the time of appointment that they have registered with the Selective Service System, or are exempt from having to do so under Selective Service law.

**BASIS FOR RATING:** A written test for Clerical Positions is required. Your rating is based on an evaluation of your experience, education, and training, and your written test results. Passing scores range from 70 to 100 before the addition of veterans' preference points. You must submit a copy of your Notice of Results for Clerical Positions. **DO NOT** send the original copy at this time.

**CTAP OR ICTAP CANDIDATES:** Individuals who have special priority selection rights under Agency Career Transition Assistance Program (CTAP) or Interagency Career Transition Assistance Program (ICTAP) must be well-qualified for the position to receive consideration for special priority selection. CTAP or ICTAP eligibles will be considered well-qualified if they receive

a score of 90 or above on the written examination.

#### HOW TO APPLY:

**APPLICATION MATERIALS MUST BE RECEIVED BY THE CLOSING DATE. FAILURE TO PROVIDE COMPLETE INFORMATION MAY RESULT IN YOUR NOT RECEIVING CONSIDERATION OR ELIGIBILITY FOR THIS POSITION.** Your application materials will not be returned. Do not submit original documents that you may need in the future.

**STEP ONE** - Submit a resume, Optional Application for Federal Employment (OF-612), or other written application format of your choice. Be sure you provide all of the information requested below:

##### Job Information:

- Announcement Number, title and grade(s) for which you are applying.

##### Personal Information:

- Full name, mailing address (with zip code) and day/evening telephone numbers (with area code).
- Social Security Number. Giving your Social Security Number is voluntary. However, we cannot process your application without it.
- Country of Citizenship.
- If ever employed by the Federal Government, please show the highest Federal civilian grade held, job series, and dates of employment in grade.

##### Education:

- High School name, city, state and zip code, date of diploma or GED.
- Colleges and/or Universities attended, city state and zip code.
- Major field(s) of study.
- Type and year of degree(s) received. If no degree received, show total credit hours received in semester or quarter hours.

Work Experience for each paid or non-paid position held related to the job for which you are applying (do not provide copies of job descriptions):

- Job title.
- Duties and accomplishments.
- Number of hours per week.
- Employer's name and address.
- Supervisor's name and phone number.
- Starting and ending dates of employment (month and year).
- Salary.
- Indicate if your current supervisor may be contacted.

##### Other Qualifications:

- Job-related training courses (title and year).

- Job-related skills (e.g., other languages, computer software/hardware, tools, machinery, typing speed, etc.)
- Job-related certificates and licenses.
- Job-related honors, awards, and special accomplishments (e.g., publications, memberships in professional or honor societies, leadership activities, public speaking, performance awards, etc.) Do not send copies of documents unless specifically requested.

**STEP TWO** - Submit other application materials, as necessary.

- S A copy of your written test results for Clerical and Administrative Positions
- If you are using education to qualify, submit copies of college transcripts or a list of college courses taken that identify for each course the college or university, semester or quarter hours earned, grade and grade-point received.
- Federal employees seeking CTAP/ICTAP eligibility must submit proof that they meet the requirements of 5 CFR 330.605(a) for CTAP and 5 CFR 330.704 for ICTAP. This includes a copy of the agency notice, a copy of their most recent Performance Rating and a copy of their most recent SF-50 noting current position, grade level, and duty location.
- Notate your application and include the required documentation if you are applying and eligible for a non-competitive appointment such as Thirty Percent or More Disabled Veteran Appointment, Veterans Readjustment Appointment (VRA), Severely Physically Handicapped Schedule A Appointment, or Former Peace Corps Appointment.
- If you are applying for Veteran Preference, submit evidence of eligibility, such as; DD-214, Certificate of Release or Discharge from Active Duty, or Standard Form 15, Application for 10-Point Veteran Preference, and the proof requested on the form.
- If you are or have been a Federal employee, please submit a copy of your last Notification of Personnel Action, Form SF-50, and your most recent or last performance appraisal.

**ADDRESS FOR SUBMITTING APPLICATION MATERIALS:** Application packages may be mailed to:  
 U. S. Office of Personnel Management  
 Washington Service Center  
 ATTN: Vacancy Announcement No. WA-CG-9-5418  
 Post Office Box 14080  
 Washington, DC 20044

In accordance with 39 U.S.C. Section 415, applications will not

be accepted in a postage paid government envelope.

Applications may be hand delivered between the hours of 7:00 a.m. and 6:30 p.m., Monday through Friday, and placed into the Employment Application Drop Box at:

U.S. Office of Personnel Management  
1900 E Street, NW  
Room 1416  
ATTN: Vacancy Announcement No. WA-CG-9-5418  
Washington, DC 20415

A picture ID is required for entrance into the building.

**ALL APPLICANTS ARE CONSIDERED WITHOUT REGARD TO RACE, RELIGION, COLOR, NATIONAL ORIGIN, SEX, POLITICAL AFFILIATION, AGE (WITH AUTHORIZED EXCEPTIONS) OR ANY OTHER NONMERIT FACTOR.**



NATIONAL SCIENCE FOUNDATION  
APPLICANT SURVEY

OMB No. 3145-0096  
Expiration: August 2002

Vacancy Ann. #: \_\_\_\_\_ Position Status (temporary/permanent): \_\_\_\_\_

Position Title/Series/Grade: \_\_\_\_\_

INSTRUCTIONS

Your completion of this form will be appreciated. Submission of this Information is voluntary and it will have no effect on the processing of your application. The data collected will be used only for statistical purposes to ensure that agency personnel practices meet the requirements of Federal law. Pursuant to 5 CFR 1320.5(b), an agency may not conduct or sponsor, and a person is not required to respond to an information collection unless it displays a valid OMB control number. The OMB control number for this collection is 3145-0096. NSF estimates that each respondent should take about 3 minutes to complete this survey, including time to read the instructions. You may have comments regarding this burden estimate or any other aspect of this survey, including suggestions for reducing this burden. If so, please send them to NSF Reports Clearance Officer, Division of Administrative Services, NSF, 4201 Wilson Blvd., Arlington, VA. 22230.

PRIVACY ACT INFORMATION

GENERAL - This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), December 31, 1974, for individuals completing Federal records and forms that solicit personal information.

AUTHORITY - Section 7201 of title 5 of the U.S. Code and Section 2000e-16 of title 42 of the U.S. Code.

PURPOSE AND ROUTINE USES

The information is used for research and for a Federal Equal Opportunity Recruitment Program (FEORP) to help insure that agency personnel practices meet the requirements of Federal law. Address questions concerning this form and its uses to the Privacy Act Officer, National Science Foundation, Arlington, VA 22230.

1. Today's Date: \_\_\_\_\_ 2. Year of Birth: \_\_\_\_\_
3. How did you learn about the particular position for which you are applying? (Circle appropriate number.)
- |                                                                            |                                                                        |
|----------------------------------------------------------------------------|------------------------------------------------------------------------|
| 01 - Newspaper (specify)                                                   | 10 - Federal, State or local job information center                    |
| 02 - Contact with NSF Personnel Office                                     | 11 - State vocational rehabilitation agency or Veterans Administration |
| (Agency Bulletin Board or other Announcement)                              | 12 - State employment office                                           |
| 03 - NSF-initiated personal contact                                        | 13 - School or college counselor or other official                     |
| 04 - Science Magazine, or other professional journal or magazine (specify) | 14 - Private job Information service                                   |
| 05 - Affirmative Action Register                                           | 15 - Private employment service                                        |
| 06 - Attendance at conference, meeting or job fair (specify)               | 16 - Friend or relative working at NSF                                 |
| 07 - NSF recruitment at school or college                                  | 17 - Friend or relative not working at NSF                             |
| 08 - Colleague referral                                                    | 18 - NSF website                                                       |
| 09 - NSF Bulletin                                                          | 19 - Internet or other website                                         |
|                                                                            | 20 - Other (specify)                                                   |
4. Please select the racial/ethnic category with which you most closely identify yourself. (Circle the appropriate letter)
- A. **American Indian or Alaskan Native.** A person having origins in any of the original peoples of North America, who maintains cultural identification through tribal affiliation or community recognition.
- B. **Asian or Pacific Islander.** A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, India, Korea, the Philippine Islands, and Samoa.
- C. **Black, not of Hispanic origin.** A person having origins in any of the Black racial groups of Africa. This does not include persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish cultures or origins.
- D. **Hispanic.** A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
- E. **White, not of Hispanic origin.** A person having origins in any of the original peoples of Europe, North Africa or the Middle East. This does not include persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish cultures or origin.

5. Sex (Circle the appropriate letter.) F - Female M - Male

6. Please provide Information on your disability status by circling the appropriate category below:

1. I do not have a disability; 2. Hearing impairment; 3. Vision impairment; 4. Missing extremities; 5. Partial paralysis; 6. Complete paralysis; 7. Convulsive disorder; 8. Mental retardation; 9. Mental or emotional illness; 10. Severe distortion of limbs and/or spine; 11. I have a disability but it is not listed.

FOR AGENCY USE

Agency Code: \_\_\_\_\_

AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

## SUPPLEMENTAL QUALIFICATIONS STATEMENT TYPING AND SHORTHAND SKILLS, GS-2/7

**Complete and submit this form with you application.**

Name \_\_\_\_\_ SSN \_\_\_\_\_

The following statement of proficiency in Typing or Shorthand or both will be accepted in lieu of a certificate of proficiency issued by an educational institution or other organization approved by the Office of Personnel Management as an alternative way of meeting the skills and abilities requirement of the position. When completing this form be specific in your claim(s) of proficiency (e.g., 50 w.p.m. and 3 errors). **Do not use ranges of proficiency (e.g., 45-50 w.p.m. and 2-4 errors).**

1. I certify that I can currently type \_\_\_\_\_ words per minute with no more than \_\_\_\_ errors. (40 wpm required). My typing speed and error rates are based on typing performance for a period of five minutes. I gained my typing skill through: \_\_\_\_ School \_\_\_\_ Work \_\_\_\_ Other\*.

\*Describe how you gained your skill.

\_\_\_\_\_  
\_\_\_\_\_

2. I certify that my current shorthand speed is \_\_\_\_\_ words per minute with no more than \_\_\_\_\_ errors and I can make correct transcriptions of my notes (80 wpm required). My dictation speed and error rates are based on shorthand performance for a period of 3 minutes. I gained my shorthand skill through: \_\_\_\_ School \_\_\_\_ Work \_\_\_\_ Other\*

\_\_\_\_\_  
\_\_\_\_\_

I understand that claims of proficiency may be verified at the time of consideration for employment. I further understand that my inability to perform as certified above may constitute a basis for termination at the onset of employment or during the probationary period of employment.

**NOTE: YOU MUST SIGN AND DATE THIS FORM ON THE REVERSE SIDE.**



## PRIVACY ACT INFORMATION

The Office of Personnel Management is authorized by section 1302 of Chapter 13 (Special Authority) and sections 1301 and 3304 of Chapter 33 (Examination, Certification and Appointment) of Title 5 of the U.S. Code to collect the information on this form.

Executive Order 9397 (Numbering System for Federal Accounts Relating to Individual Persons) authorizes the collection of your Social Security Number (SSN). Your SSN is used to identify this form with your basic application. It may be used for the same purposes as stated on the application.

The information you provide will be used primarily to determine your qualifications for Federal employment. Other possible uses or disclosures of the information are;

1. To make requests for information about you from any source (e.g. former employers or schools), that would assist an agency in determining whether to hire you;
2. To refer your application to prospective Federal employers and, with your consent, to others (e.g. State and local governments) for possible employment;
3. To a Federal, State, or local agency for checking on violations of law or other lawful purposes in connection with hiring or retaining you on the job, or issuing you a security clearance;
4. To the courts when the Government is party to a suit; and
5. When lawfully required by Congress, the Office of Management and Budget, or General Services Administration.

Providing the information requested on this form, including your SSN is voluntary. However, failure to do so may result in your not receiving an accurate rating, which may hinder your chances for obtaining Federal employment.

### ATTENTION - THIS STATEMENT MUST BE SIGNED

**Read the following paragraph carefully before signing this Statement**

A false answer to any question in this Statement may be grounds for not employing you, or for dismissing you after you begin work, and may be punishable by fine or imprisonment (U.S. Code, Title 18, Sec. 1001). All statements are subject to investigation, including a check of your fingerprints, police records, and former employers. All the information you give will be considered in reviewing your Statement and is subject to investigation.

#### CERTIFICATION

I CERTIFY that all of the statements made in this Statement are true, complete and correct to the best of my knowledge and belief, and are made in good faith.

SIGNATURE (*Sign in ink*)

DATE SIGNED